(Gen. Reg. No.	tie Cupp No. 11)	SERVICES	S OTHER THAN	I PERSON	AL Bu	Vou. No.	00 65-3 8			
Standard Form No. 1034—Revised Form prescribed by Comptroller General, U. S. Approved FOR PIEC VOUCHER FOR PURCHASES September 7, 1950 SERVICES OTHER THAN PERSONAL Bu. V. (Amended February 20, 1962) U. S. COST REIMBURSABLE							PAID BY			
		(Department, bureau,	, or establishment)					i i		
oucher prep	ared at		Hivo place and date)			-	0	1 #4		
Voucher prepared at							TIPS 2238			
							COPY	OF 2		
0	~=========	(Payee						-		
	(Addres		(City)	(State)		1		AMOUNT		
No. and Date of Order	Date of Delivery or Service	ARTIC (Enter description, item schedule, and othe Discount Terms	LES OR SERVICES number of contract or r information deemed	Federal supply necessary)	QUANTITY		PRICE		Cts.	
		Cost						1,279	•17	
PAYMENT: Complete Partial Partial			V	277						
Final	to	X77 :	uation sheet(s) if necess	overnment B/L	No.		Total	1,279	.17	
Shipped from		and just and that payment			(Payee must N					
i certify that the	above bill is correct.	(Sign original only)		D	ifferences					
STA	ATOTHR	(Digit Oxiginate Serry)							·	
Date 7/3/58 *Pavee		ficate not required when a like certificate is made by payee on attached		d bill or bills)	Amount verifie	d; correct fo	correct for 1, 27		717	
Per		Title			(Signature or in		Invoice Rec			
Contract No.	A-101	Date	Reg. No.		Date					
Pursuant to autl	nority vested in me, I	certify that this account is	correct and proper for	payment.						
† Approved for \$	\$		SIGN	†	(Autho	orized Certif	ying Officer)			
By			ORIGINAL ONLY	Title						
				Date						
Title	THE REVERSE OF TH	IS FORM MUST BE EXECUTED WH	EN PURCHASES ARE MADE O	R SERVICES SECUR	ED WITHOUT WRITTE	EN AGREEMEN	T IN ANY FORM	I		
		NTING CLASSIFICATION								
	ACCOON	ITING CLASSIC TOTAL								
	*									
						∫on '	Freasurer of th	e United States in	ı favor	
	1 N	datad	19 1	OF \$) nov	ee nameo soot			
Paid by Chec	ck No	dated , on	, 19, 1 , 19,	Payee		(pay	ee named abov			

Approved For Release 2002/06/10 : CIA-RDP64-00360R000600020065-3

6/29/58 ACCOUNTS PAYABLE WEEKLY DET DISTR DATE THE RAMO-WOOLDRIDGE CORPORATION FORM STL - 660 TO Maj. Int. Sub. Account M.J.O. S.D. Work Order PAYMENT DATE GROSS BATCH Vendor NET AMOUNT INVOICE PURCHASE CHECK DISCOUNT Number AMOUNT NUMBER NUMBER Mo. Day No. Mo. Day Yr. 196 196 * 196 ** 196 *** 50 25 40 22 12501 5046 01 27 14973 06 24 352 33 06 24 8

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